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**MAR 02 2005**

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**DATE:** March 2, 2005

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| Examiner Benjamin C. Lee<br>GAU 2632 |               |               |

**FROM:** Stephen C. Beuerle

**Re:** Application No. 10/627,478

**CC:**

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**MESSAGE:**

Attached are:

- 1) transmittal form;
- 2) fee transmittal; and
- 3) reply

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P1O/SB/21 (08-04)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

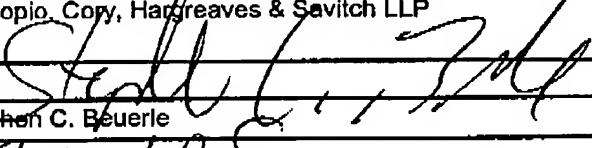
Total Number of Pages in This Submission

|                        |                 |
|------------------------|-----------------|
| Application Number     | 10/627,478      |
| Filing Date            | 07/24/2003      |
| First Named Inventor   | George H. Lerg  |
| Art Unit               | 2632            |
| Examiner Name          | Benjamin C. Lee |
| Attorney Docket Number | TRAPTEC13       |

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|  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   |   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s) _____                                      |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |
| Remarks  |   |   |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

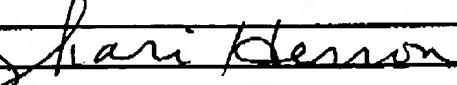
|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | Procopio, Cory, Hargreaves & Savitch LLP  |          |        |
| Signature    |  |          |        |
| Printed name | Stephen C. Beuerle  |          |        |
| Date         | 3/2/05  | Reg. No. | 38,380 |

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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3/2/05

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|   |  |                          |                 |
|---|--|--------------------------|-----------------|
| <b>Effective on 12/06/2004.</b><br><i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i> |  | <b>Complete If Known</b> |                 |
| <b>FEET TRANSMITTAL</b>   |  | Application Number       | 10/627,478      |
| for FY 2005   |  | Filing Date              | 07/24/2003      |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                         |  | First Named Inventor     | George H. Lerg  |
|   |  | Examiner Name            | Benjamin C. Lee |
|   |  | Art Unit                 | 2632            |
| TOTAL AMOUNT OF PAYMENT (S)   |  | Attorney Docket No.      | TRAPTEC-13      |

**METHOD OF PAYMENT** (check all that apply)

|  |                                      |   |                               |  |
|--|--------------------------------------|---|-------------------------------|--|
| <input type="checkbox"/> Check   | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order  | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____        |
| <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-2075                                    |                                      |   |                               | Deposit Account Name: Procopio, Cory, Hargreaves & Savitch LLP |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |                                      |   |                               |  |
| <input type="checkbox"/> Charge fee(s) indicated below   |                                      | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |                               |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 |                                      | <input type="checkbox"/> Credit any overpayments                                  |                               |  |

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> |                     | <u>SEARCH FEES</u> |                     | <u>EXAMINATION FEES</u> |                     |                       |
|-------------------------|--------------------|---------------------|--------------------|---------------------|-------------------------|---------------------|-----------------------|
|                         | <u>Fee (\$)</u>    | <u>Small Entity</u> | <u>Fee (\$)</u>    | <u>Small Entity</u> | <u>Fee (\$)</u>         | <u>Small Entity</u> | <u>Fees Paid (\$)</u> |
| Utility                 | 300                | 150                 | 500                | 250                 | 200                     | 100                 |                       |
| Design                  | 200                | 100                 | 100                | 50                  | 130                     | 65                  |                       |
| Plant                   | 200                | 100                 | 300                | 150                 | 160                     | 80                  |                       |
| Reissue                 | 300                | 150                 | 500                | 250                 | 600                     | 300                 |                       |
| Provisional             | 200                | 100                 | 0                  | 0                   | 0                       | 0                   |                       |

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|---------------------|---------------------|-----------------|-----------------------|---------------------|-----------------|-----------------|
| - 20 or HP =        | x                   | =               |                       |                     | 50              | 25              |

HP = highest number of total claims paid for, if greater than 20

| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> | <u>Multiple Dependent Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|----------------------|---------------------|-----------------|-----------------------|----------------------------------|-----------------|----------------------|
| - 3 or HP =          | x                   | =               |                       |                                  | 200             | 100                  |

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

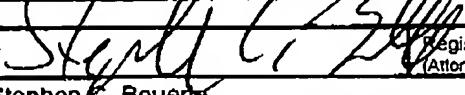
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| - 100 =             | /50=                | (round up to a whole number) x                          | =               |                      |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge)

|   |   |
|---|---|
| <b>SUBMITTED BY</b>                         |   |
| Signature                                   |  |
| Name (Print/Type)                           | Stephen C. Beuerle  |
| Registration No. 38,380<br>(Attorney/Agent) | Telephone 619-238-1900  |
| Date  | 3/2/05  |

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Serial No. 10/627,478  
March 2005 Reply to  
28 December 2004 Office Action

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re the Application of:**

Lerg, et al.

**Serial No.: 10/627,478**

**Filed: July 24, 2003**

**For: GRAFFITI DETECTION SYSTEM AND  
METHOD OF USING THE SAME**

**Group Art Unit: 2632**

**Examiner: B. Lee**

**Attorney No.:  
TRAPTEC-13**

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**REPLY**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed December 28, 2004, reconsideration and allowance of the present application is respectfully requested in view of the following Remarks:

**CERTIFICATE OF TRANSMISSION**  
I hereby certify that this correspondence is being facsimile transmitted to the USPTO, fax. Number 703-872-9306 on the date shown below.

3/2/05

Shari Heron

Printed Name

Signature of Person Faxing Papers

1

111024.000004/519257.01